

COUNTY OF LOS ANGELES
DEPARTMENT OF PUBLIC WORKS
BUILDING AND SAFETY / LAND DEVELOPMENT

SAN GABRIEL VALLEY
125 BALDWIN
ARCADIA CA 91007
PHONE: (626) 574-0941 EXT: # 0500

BUILDING PERMIT
ALTERATION/REPAIR
BL 0500 041120060

LEGAL ID: TR: 3489 LT: 28

ASSESSOR INFORMATION NUMBER: 5755-019-015

TENANT:

OWNER: WILTON, DIANA
233 MICHELLINDA
PASADENA CA
TEL. NO: (808) 205-1050-

APPLICANT: M-M CONSTRUCTION CO

TEL. NO: -

CONTRACTOR: M AND-M CONSTRUCTION CO
10056 KLOKUK AVENUE
CHATS WORTH CA 91311
TEL. NO: (818) 652-6715-
LIC. NO 780550B

ARCHITECT OR ENGINEER:

TEL. NO: -
LIC. NO: -

MAP NO: SEWER MAP BOOK: PAGE: 162265 FIRE ZONE: 3 CMP: 01

NO. OF FAMILIES: DWELLING UNITS: APT/COND: STAT CLASS: NO NO 21

AIR QUALITY: SCHOOL WITHIN HAZARDOUS MATERIALS NO NO

REQUIRED SET BACK YARD: HWY: TOTAL SETBACK FROM EXIST FRONT PL- PROP LINE: WIDTH: SIDE PL-

12/14/04 slower to cover Allen

STRUCTURE: 0 SQ. FT NO. OF STORIES CONST TYPE VN

EXIST BLDG USE: RESID USE ZONE: R-1
EXIST OCC GRP:

BIDGS. NOW ON LOT:

VALUATION: 45,000

FEE DESCRIPTION:

QUANTITY: UOM:

AMOUNT:

AA BLDG PERMIT ISSUANCE 45000.00 VAL
AC STRONG MOTION RESID 4.50
AX BUILDING REVIEW FEE 66.10
D2 PERMIT W/O EN-HC 590.20
TOTAL FEES 683.20

FEES PAID

BUILDING ADDRESS: 233 MICHELLINDA AV S
PASD CA 91074933
NEAREST CROSS STREET: COLORADO
THOMAS PAGE: 566 GRID: J5 LOCALITY: PASADENA

ISSUED ON: 11/12/04 PROCESSED BY: DLB EXPIRES ON: 11/07/05

FINAL DATE 11/20/05 FINED BY: Govea CODE:

DESCRIPTION OF WORK: KITCHEN & BATH REMODELING, RESTUCCO EXTERIOR, C/O 10 WINDOWS
RESIZE 2 WINDOWS, REPOOF GARAGE ONLY.

SPECIAL CONDITIONS:

APPROVALS

DATE INSPECTOR SIGNATURE

LOCATION AND SETBACKS

SOILS ENGINEER APPROVAL

FOUNDATION/TRENCH FORMS

SLAB/UNDER FLOOR

RAISED FLOOR FRAMING

UNDERFLOOR INSULATION

FLOOR SHEATHING

ROOF SHEATHING

SHEAR PANELS

FRAME INSPECTION

FIRE SPRINKLER HANGERS

INSULATION/WEATHER STRIP

INTERIOR LATH/DRYWALL

EXTERIOR LATH

RATED FLOOR/CEIL ASSEM.

RATED WALL ASSEMBLIES

RATED SHAFTS/OPENINGS

T-BAR CEILINGS

LOT DRAINAGE

LICENSED CONTRACTOR'S DECLARATION

I hereby affirm under penalty of perjury that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.

License Class

Lic. No.

780550

Contractor's Signature

Date

OWNER-BUILDER DECLARATION

I hereby affirm under penalty of perjury that I am exempt from the Contractors License Law for the following reason (Sec. 7031.5, Business and Professions Code: Any city or county which requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for such permit to file a signed statement that he or she is licensed pursuant to the provisions of the Contractors License Law (Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code) or that he or she is exempt therefrom and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than five hundred dollars (\$500).):

☐ I am exempt under Sec. _____, B.& P.C. for this reason:

[Electrical, Plumbing & Sewer Permits Only]

☐ I, as owner of the property, will do the work, and the structure is not intended or offered for sale (Sec. 7044, Business and Professions Code: The Contractors License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or herself, provided that such improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of completion, the owner-builder will have the burden of proving that he or she did not build or improve for the purpose of sale.).

[All Other Permits]

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Owner Signature

Date

WORKER'S COMPENSATION DECLARATION

I hereby affirm under penalty of perjury one of the following declarations:

☐ I have and will maintain a certificate of consent to self-insure for worker's compensation, as provided for by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued.

☐ I have and will maintain worker's compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My worker's compensation insurance carrier and policy number are:

Carrier

Policy Number

☐ I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the worker's compensation laws of California, and agree that if I should become subject to the worker's compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

Applicant Signature

Date

WARNING: FAILURE TO SECURE WORKER'S COMPENSATION COVERAGE IS UNLAWFUL, AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLLARS (\$100,000), IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST, AND ATTORNEY'S FEES.

LOBBYIST ORDINANCE CERTIFICATION

[Complete this section for permits in unincorporated Los Angeles County only]

This is to certify that I, as permit applicant, am familiar with the requirements of Los Angeles County Code Chapter 2.160 et seq., (relating to the Los Angeles County Lobbyist Ordinance) and that all persons acting on behalf of myself compiled and will continue to comply therewith through the application process.

Applicant (Print Name)

Applicant Signature

Company Name (if employed by an entity/agency)

Date

JOB ADDRESS
LOCALITY

HAZARDOUS MATERIAL DECLARATION

Will the applicant or future building occupant handle a hazardous material or a mixture containing a hazardous material equal to or greater than the amount specified on the hazardous materials information guide?

Yes ☐

No ☐

Will the intended use of the building by the applicant or future building occupant require a permit for construction or modification from the South Coast Air Quality Management District (SCAQMD)? See permitting checklist for guidelines.

Yes ☐

No ☐

I have read the hazardous materials information guide and the SCAQMD permitting checklist. I understand my requirements under the Los Angeles County Code Title 2, Chapter 220 Sections 220.100 through 220.140 concerning hazardous material reporting and for obtaining a permit from the SCAQMD.

ASBESTOS NOTIFICATION

☐ Notification letter sent to SCAQMD or EPA

☐ I declare that notification of asbestos removal is not applicable to addressed project.

CONSTRUCTION LENDING AGENCY

I hereby affirm under penalty of perjury that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Cw.C.).

Lender's Name

Lender's Address



I certify that I have read this application and state under the penalty of perjury that the above information is correct. I agree to comply with all City and County ordinances and State laws relating to building construction, and hereby authorize representatives of this County to enter upon the above-mentioned property for inspection purposes.

Applicant or Agent Signature

Date

LICENSED CONTRACTOR'S DECLARATION

I hereby affirm under penalty of perjury that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.

License Class B Lic. No. 180550

Contractor's Signature Robert A. 11/2/04 Date

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Owner Signature _____ Date _____

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Carrier _____

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Applicant Signature Robert A. 11/2/04 Date

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LOBBYIST ORDINANCE CERTIFICATION

[Complete this section for permits in unincorporated Los Angeles County only]

This is to certify that I, as permit applicant, am familiar with the requirements of Los Angeles County Code Chapter 2.160 et seq., (relating to the Los Angeles County Lobbyist Ordinance) and that all persons acting on behalf of myself compiled and will continue to comply therewith through the application process.

Applicant (Print Name) Tali Askelov Applicant Signature Robert A. 11/2/04

Company Name (if employed by an entity/agency) M-M Construction Co Date 11/2/04

JOB ADDRESS
LOCALITY

HAZARDOUS MATERIAL DECLARATION

Will the applicant or future building occupant handle a hazardous material or a mixture containing a hazardous material equal to or greater than the amount specified on the hazardous materials information guide?

Yes ☐ No ☐

Will the intended use of the building by the applicant or future building occupant require a permit for construction or modification from the South Coast Air Quality Management District (SCAQMD)? See permitting checklist for guidelines.

Yes ☐ No ☐

I have read the hazardous materials information guide and the SCAQMD permitting checklist. I understand my requirements under the Los Angeles County Code Title 2, Chapter 220 Sections 220.100 through 220.140 concerning hazardous material reporting and for obtaining a permit from the SCAQMD.

ASBESTOS NOTIFICATION

☐ Notification letter sent to SCAQMD or EPA

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CONSTRUCTION LENDING AGENCY

I hereby affirm under penalty of perjury that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, C.W.C.).

Lender's Name _____

Lender's Address _____



I certify that I have read this application and state under the penalty of perjury that the above information is correct. I agree to comply with all City and County ordinances and State laws relating to building construction, and hereby authorize representatives of this County to enter upon the above-mentioned property for inspection purposes.

Applicant or Agent Signature Robert A. 11/2/04 Date 11/2/04

COUNTY OF LOS ANGELES
DEPARTMENT OF PUBLIC WORKS
BUILDING AND SAFETY / LAND DEVELOPMENT

SAN GABRIEL VALLEY
125 BALDWIN
ARCADIA CA 91007
PHONE: (626) 574-0941 EXT: # 0500

PLUMBING PERMIT
PL 0500 0411120020

LEGAL ID: TR: 3489 LT: 28

ASSESSOR INFORMATION NUMBER:
5755-019-015

TENANT:

OWNER:
WALTON, DIANA
233 MICHIILINDA
PASADENA CA
TEL. NO:
(808) 205-1050-

APPLICANT:
M-M CONSTRUCTION CO

CONTRACTOR:
M AND-M CONSTRUCTION CO
10056 KLOKUK AVENUE
CHATS WORTH CA 91311
TEL. NO:
(818) 652-6715-
LIC. NO
780550B

ARCHITECT OR ENGINEER:
TEL. NO:
LIC. NO:

FEE DESCRIPTION: QUANTITY: UOM: FEES PAID AMOUNT:

01 PERMIT ISSUANCE FEE	1.00	VAL.	22.40
03 BACKWATER VALVE(S)	1.00	FIX	37.90
07 BATHTUBS/SHOWERS	1.00	FIX	13.10
13 DISHWASHER(S)	1.00	FIX	13.10
19 FLOOR SINK(S)	1.00	FIX	13.10
25 LAVATORIES / SINKS	1.00	FIX	13.10
27 PRESS REG DEVICE(S)	1.00	DEV	13.10
47 WATER HEATER(S)	1.00	WTH	13.10
60 DWV REPAIR OR ALTER	2.00	SYS	26.20
TOTAL FEES			165.10

BUILDING ADDRESS:

233 MICHIILINDA AV S
PASD CA 911074933
NEAREST CROSS STREET: COLORADO
THOMAS PAGE: 566 GRID: J5 LOCALITY: PASADENA

ISSUED ON: 11/12/04 PROCESSED BY: MB PLAN BY: EXPIRES ON: 05/11/05

FINAL DATE: 1/26/05 FINAL BY: CODE: 60

DESCRIPTION OF WORK
PLUMBING FOR REMODEL.

SPECIAL CONDITIONS:

APPROVALS	DATE	INSPECTOR SIGNATURE
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UNDER SLAB WORK

WATER SERVICE
PLASTIC Y/N METAL Y/N

ROUGH PLUMBING

GAS PIPING

GAS VENT

HOT WATER HEATER

PLUMBING FIXTURES

LAWN SPRINKLERS

GAS TEST

UTILITY COMPANY NOTIFIED

CIV

GRAY WATER SYSTEM

REPORT ID: DPR263

ROUTE TO: BS0500

LICENSED CONTRACTOR'S DECLARATION

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License Class B Lic. No. 780550

Contractor's Signature Decker

Date 11/12/04

OWNER-BUILDER DECLARATION

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[Electrical, Plumbing & Sewer Permits Only]

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[All Other Permits]

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Owner Signature _____

Date _____

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Carrier _____

Policy Number _____

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Applicant Signature Decker

Date 11/12/04

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LOBBYIST ORDINANCE CERTIFICATION

[Complete this section for permits in unincorporated Los Angeles County only]

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Applicant (Print Name) Tali Daskalov

Applicant Signature Decker

Company Name (if employed by an entity/agency) M-M Construction Co. Date 11/12/04

JOB ADDRESS

LOCALITY

HAZARDOUS MATERIAL DECLARATION

Will the applicant or future building occupant handle a hazardous material or a mixture containing a hazardous material equal to or greater than the amount specified on the hazardous materials information guide?

Yes ☐ No ☐

Will the intended use of the building by the applicant or future building occupant require a permit for construction or modification from the South Coast Air Quality Management District (SCAQMD)? See permitting checklist for guidelines.

Yes ☐ No ☐

I have read the hazardous materials information guide and the SCAQMD permitting checklist. I understand my requirements under the Los Angeles County Code Title 2, Chapter 220 Sections 220.100 through 220.140 concerning hazardous material reporting and for obtaining a permit from the SCAQMD.

ASBESTOS NOTIFICATION

☐ Notification letter sent to SCAQMD or EPA

☐ I declare that notification of asbestos removal is not applicable to addressed project.

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Applicant or Agent Signature Decker

Date 11/12/04

0500

ARCADIA CA 91007
PHONE: (626) 574-0941 EXT:

MECHANICAL PERMIT
ME 0500 0411120011

LEGAL ID:	TR: 3489	LT: 28
ASSESSOR INFORMATION NUMBER:	5755-019-015	
TENANT:		
OWNER:	WALTON, DIANA 233 MICHELLINDA PASADENA CA	TEL. NO: (808) 205-1050-
APPLICANT:	M-M CONSTRUCTION CO	TEL. NO: -
CONTRACTOR:	M AND-M CONSTRUCTION CO 10056 KIOKUK AVENUE CHATSWORTH CA 91311	TEL. NO: (818) 652-6715- LIC. NO 780550B
ARCHITECT OR ENGINEER:		TEL. NO: - LIC. NO:
FEE DESCRIPTION:	QUANTITY: UOM:	AMOUNT:
01 PERMIT ISSUANCE FEE		22.40
32 APPLIANCE VENT	1.00 VEN	10.40
41 SINGLE REGISTER FANS	1.00 FAN	12.80
TOTAL FEES		45.60
BUILDING ADDRESS:	233 MICHELLINDA AV S PASD CA 911074933 NEAREST CROSS STREET: COLORADO THOMAS PAGE: 566	ISSUED ON: 11/12/04 PROCESSED BY: MB PLAN BY: EXPIRES ON: 05/11/05
FINAL DATE	11/12/04	FINAL BY: [Signature]
DESCRIPTION OF WORK	MECHANICAL FOR REMODEL.	CODE:
SPECIAL CONDITIONS:		
APPROVALS	DATE	INSPECTOR SIGNATURE
FAN/WALL FURNACE		
COMBUSTION AIR OPENINGS		
DUCT WORK		
A/C/COMPRESSOR		
THERMOSTAT		
FIRE DAMPERS		
SMOKE DETECTION DEVICES		
COMMERCIAL HOOD		
REPORT ID: DPR264	ROUTE TO: BS0500	

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Lender's Address

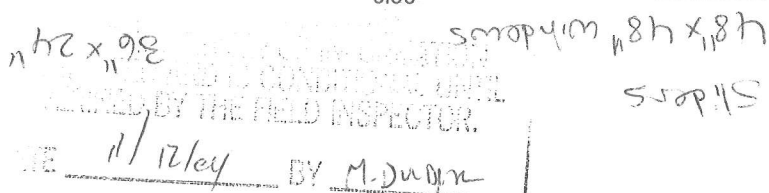


I certify that I have read this application and state under the penalty of perjury that the above information is correct. I agree to comply with all City and County ordinances and State laws relating to building construction, and hereby authorize representatives of this County to enter upon the above-mentioned property for inspection purposes.

Applicant or Agent Signature

Date

36" x 48" windows



REQUIRED INSULATION

CEILINGS	R 30
WALLS	R 13
FLOORS	R 19

